

FEB 27 2012

Date Received
Official Use Only

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CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT**STATEMENT OF ECONOMIC INTERESTS**
RECEIVED
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) 2012 FEB 28 PM 4:25 (FIRST) (MIDDLE)
LaMalfa Douglas Lee

1. Office, Agency, or Court

Agency Name

State Senate

Division, Board, Department, District, if applicable

District 4

Your Position

Senator

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)☒ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County _____☐ County of _____☐ City of _____☐ Other _____**3. Type of Statement (Check at least one box)**☒ Annual: The period covered is January 1, 2011, through December 31, 2011.☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.☐ Assuming Office: Date assumed ____/____/____☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

☒ Schedule A-1 - Investments - schedule attached☒ Schedule C - Income, Loans, & Business Positions - schedule attached☒ Schedule A-2 - Investments - schedule attached☒ Schedule D - Income - Gifts - schedule attached☐ Schedule B - Real Property - schedule attached☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I have used all reasonable diligence in preparing this statement. I have reviewed it herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed

27 Feb 2012
(month, day, year)

Signature

SCHEDULE A-1
Investments

Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
LAMALFA

<p>▶ NAME OF BUSINESS ENTITY <u>Tri Counties Bank</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY _____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>New Generation Software</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY _____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY _____</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
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Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>LaMalfa</u>

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

DSL FARMS

ADDRESS (Business Address Acceptable)

P.O. Box 304 Richvale, CA 95974

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Rice Production

YOUR BUSINESS POSITION

Partner

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☒ Other Share of profits
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address
City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name LAMALFA

► NAME OF SOURCE

CalChamber

ADDRESS (Business Address Acceptable)

1215 K St, Ste 1400, Sacramento

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6 / 1 / 11	\$ 189.72	Lunch
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Consumer Electronic Association

ADDRESS (Business Address Acceptable)

1919 South Eads St, Arlington, VA 22202

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8 / 30 /	\$ 65.47	demonstration
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Klamath Alliance

ADDRESS (Business Address Acceptable)

P.O. Box 1234 Yreka, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 / 19 / 11	\$ 288.45	Lodging, Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Council for Legislative Excellence

ADDRESS (Business Address Acceptable)

2150 River Plaza Dr., Ste 150, Sacramento, Ca

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 8 / 11	\$ 75.45	Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

CA New Car Dealers Association

ADDRESS (Business Address Acceptable)

1415 L Street, Ste 700, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 29 / 11	\$ 107.52	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

PG&E & Christopher Johns

ADDRESS (Business Address Acceptable)

1415 L St., Ste 280, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 29 / 11	\$ 145.90	Dinner
/ /	\$	
/ /	\$	

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION	
Name	
LAMALFA	

► NAME OF SOURCE

CA Agricultural Leadership

ADDRESS (Business Address Acceptable)

425 West Blanco Rd., Salinas, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 26 / 11	\$ 53.00	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Kaiser Permanente

ADDRESS (Business Address Acceptable)

1600 Eureka Rd., Roseville, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 1 / 11	\$ 100.00	Kids First Luncheon
3 / 25 / 11	\$ 50.00	Rocklin Chamber
/ /	\$	breakfast

► NAME OF SOURCE

CA Rice Commission

ADDRESS (Business Address Acceptable)

8801 Folsom Blvd. Ste 172, Sacramento

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 15 / 11	\$ 54.30	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments:



RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION

SCHEDULE A-2

Investments, Income, and Assets
2012 APR 10 AM 11:57 Business Entities/Trusts
(Ownership Interest is 10% or Greater)

APR 9 2012

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

1. BUSINESS ENTITY OR TRUST

LaMalfa Trucking

Name

35 LaMalfa Lane Oroville CA 95965

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Trucking

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ACQUIRED ____/____/11 DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☒ Partnership ☐ Other

YOUR BUSINESS POSITION

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☒ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

Associated Rice Marketing coop; Sunwest Mills
Richvale Seed Growers

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/11 ACQUIRED ____/____/11 DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

Filer's Verification

Print Name Doug LaMalfa

Office, Agency or Court CA State Senate

Statement Type ☒ 2011/2012 Annual ☐ Annual ☐ Assuming ☐ Leaving ☐ Candidate

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California

Date Signed

9 APR 2012
(month, day, year)

Filer's Signature

(c)(1)